



KENTUCKY LABOR CABINET

Division of Workers Compensation Funds
Payment Branch

Suite 4, 1047 U.S. Highway 127 South
Frankfort KY 40601
www.labor.ky.gov

Steven L. Beshear
Governor

Larry L. Roberts
Secretary

Robert L. Whittaker
Director

Telephone: (502) 564-5467

FAX: (502) 564-5112

DIRECT DEPOSIT SIGN UP FORM

Please fill out all information completely.

Sign, date and mail form to: **Kentucky Labor Cabinet**
Division of Worker's Compensation Funds
1047 US HWY 127 South - Ste. 4
Frankfort, KY 40601

Please allow up to 4 weeks for Direct Deposit to begin.

CLAIM NUMBER: _____

CLAIMANT'S NAME: _____ SS# _____

ADDRESS: _____

TELEPHONE NUMBER: _____

*****BANK INFORMATION*****

(YOU MAY ATTACH A VOIDED CHECK HERE)

BANK NAME: _____

BANK ADDRESS: _____

BANK PHONE NUMBER: _____

ROUTING NUMBER: _____

ACCOUNT NUMBER: _____

CHECKING OR SAVINGS: ☐ Checking ☐ Savings

SIGNATURE OF PAYEE: _____ DATE: _____

